

PATENT APPLICATION FEE DETERMINATION RECORD

NON-USE DETERMINATION RECORD
Substitute for Form PTO-875. Effective December 8, 2004

~~Application or Docket Number~~
~~101-664-893~~

APPLICATION AS FILED - PART I

NOT FILED - PAR
(Column 1)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(u) (4) & (5))	N/A	N/A
SEARCH FEE (37 CFR 1.16(h), (i), or (j))	N/A	N/A
EXAMINATION FEE (37 CFR 1.16(g), (h), or (i))	N/A	N/A
TOTAL CLAIMS (37 CFR 1.16(i))	minus 20 =	-
INDEPENDENT CLAIMS (37 CFR 1.16(n))	minus 3 =	-
APPLICATION SIZE FEE (37 CFR 1.16(r))	if the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(u))		

SMALL ENTITY	
RATE (S)	FEES (S)
NA	150.00
NA	
NA	
X8 25	
X100	
+180	
TOTAL	

OTHER THAN SMALL ENTITY	
RATE (\$)	FEES (\$)
NIA ..	300.00
NIA	
NIA	
X\$50	
X200	
+360=	
TOTAL	

* If the difference in column 3 is less than

If the difference in column 1 is less than zero, enter "0" in column 2.

APPLICATION AS AMENDED - PART II

		(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	11/28/05	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total 37 CFR 1.16(a)	20	Minus	20
	Independent 37 CFR 1.16(a)	3	Minus	3
	Application Size Fee (37 CFR 1.16(e))			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(g))				

SMALL ENTITY	
RATE (S)	ADDITIONAL FEE (S)
XS 25	-
X100	-
+180=	
TOTAL ADD'L FEE	

OR	OTHER THAN SMALL ENTITY
	RATE (\$)
OR	X\$50
OR	X200
R	+360
R	TOTAL AD'L FEE

Section 13

		(Column 1)	(Column 2)	(Column 3)	
AMENDMENT B	30 p4	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total (37 CFR 1.102)	20	Minus	20	-
	Independent (37 CFR 1.102)	2	Minus	3	7
	Application Size Fee (37 CFR 1.16(a))				
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16)					

RATE (\$)	ADDITIONAL FEE (\$)
XS 25	
X100	
+180 _{ea}	
TOTAL ADD'L FEE	

	RATE (\$)	ADDITIONAL FEE (\$)
OR	X50	
OR	X200	
OR	+360 ₃	
OR	TOTAL ADDL FEE	

• If the entry in column 1 is less than the entry in column 2, write "D" in column 3.
 → If the "Number Previously Paid For" is less than the "Number Paid For" in the
 → If the "Number Paid For" is less than the "Number Previously Paid For" in the

If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20". If the Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".

• The Highest Number Previously Paid For (Total or Individual) in this space is less than 3, enter "3".

If you need assistance, call 1-800-773-4736. If the space is less than 3, enter "3".

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.